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## STATEMENT OF DISCLOSURE OF INTERESTS

GOVERNOR/GOVERNOR'S CABINET/CABINET LEVEL STAFF/ CONSTITUTIONAL OFFICERS/GENERAL ASSEMBLY MEMBERS

INSTRUCTIONS: This form is for reporting all interests required to be disclosed under the Conflict of Interest Disclosure Act (T.C.A. §§ 8-50-501 et seq., 2-10-128 and 2-10-129). Statements of Disclosure of Interests must be filled annually by April 15 with the Tennessee Ethics Commission, 201 4th Avenue North, Suite 1820, Nastiville, TN 37243 If you have questions, please feel free to contact the Commission at (615) 253-8634 or e-mail us at ethics.counsel@state.tn.us. You must complete items 1-6. If there were no changes in items 7-13 since the previous report, you may check the box in item 14; otherwise, you must complete items 7-13. Disclosure statements must be signed and the signature attested to by a witness in item 15. Attach additional pages as necessary. Please note that the information listed on this statement will be posted on the Commission's website as required by T.C.A. §§ 2-10-128(b), 2-10-129(b) and 8-50-501(d)(1).

NOTE: An amended Statement of Disclosure of Interests must be filed whenever reported conditions change due to the termination or acquisition of any interests for which disclosure is required by law.

1. DATE OF DISCLOSURE 2. NAME OF OFFICIAL AND TITLE/POSITION			NC
3/21/2007	<u>Viola P. Miller.</u> Services	<u>Commissioner,</u> D	ept. of Children
3. ADDRESS Street or Rural Route	City	State	Zip Code
1209-B 5th Avenue North	Nashville	Tennessee,	37208
3a. PHONE NUMBER 61.5-251-1657		***	
a. List major source(s) of private in of this provision, income shall be reported income" include, but are not limited to, office be stated; however, you must list the name received from a security listed on the New income received from investments with a feentity. For income derived from the owners enterprise in lieu of any investment broken on your or your spouse's behelf. For incomfund in lieu of the business enterprise secuclient list or customer list, or to list the address of the customer list.	for the calendar year in whites, directorships and salar and address of each sound York Stock Exchange, Amederal or state chartered baship of a business enterprising firm or other fiduciary the derived from a mutual fur	ch it is received. "Maji ied employment. No di ce of Income, except fo erican Stock Exchange ink. You may list only t e's securities, you may nat may possess or may not, you may list the na fund. You are not requ	or sources of private ollar amounts need to or sources of income or NASDAQ or from the name of the anage the securities are of the runtual
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	Manager		W. F.

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b. List major source(s) of private income of more than \$1,000 of any minor child residing with you. No dollar amounts need be stated. NONE 5. POSITIONS HELD: List any position held including, but not limited to, officer, director, trustee, general partner, proprietor, or representative of any corporation, firm, partnership, business enterprise, non-profit organization or educational institution. Both the month and year must be reported for the period of time the position was held. Positions with the federal government, religious, social, fraternal or political entities, and those solely of an honorary nature, do not require disclosure. Name of Organization Position Held Date Held NONE 6. BLIND TRUST: For any trust considered to be a blind trust pursuant to T.C.A. § 35-50-120 in which you or your spouse is an interested party, identify the nature of the interest and list the location of the trust and the name and address of the Trustee. No individual asset held in such a blind trust need be disclosed. 7. INVESTMENTS: List any investment by you, your spouse or minor children residing with you in any corporation or other business organization in excess of ten thousand dollars (\$10,000) or five percent (5%) of the total capital. The name of the corporation or organization must be listed but no dollar amounts or percentages of the investment need be stated. NONE 8. LEGISLATIVE EXPENSES: List the amount and source (by name) of any contribution from private source(s) used for defraying the expenses related to the adequate performance of your legislative duties. NONE LOBBYING: List any person, firm or organization for whom any associate, your spouse, or minor children residing with you performs compensated lobbying services. Also, list any firm engaged in compensated lobbying in which you, your spouse or minor children residing with you hold any interest. Explain the terms of any such employment, the subject matters lobbied and/or the measures to be supported or opposed.

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10,	PROFESSIONAL SERVICES: List in general terms (by areas of the client's Interests) the entitles to which professional services, such as those of an attorney, accountant or architect, are furnished by you or your spouse.			
-	NONE			
11.	RETAINER FEES: List any retainer fee you receive from any person, firm or organization which is in the practice of promoting or opposing, influencing or attempting to influence, directly or indirectly, the passage or defeat of any legislation before the Tennessee General Assembly, its legislative committees or the members thereof.			
-	NONE			
12.	BANKRUPTCY: List any adjudication of bankruptcy or discharge received in any United States district court within five (5) years of the date of this report.			
-	NONE			
13.	LOANS: List any loan or combination of loans for more than one thousand dollars (\$1,000) from the same source made in the previous calendar year to you, your spouse or minor children residing with you. Loans need not be disclosed on this report if they are:			
	<ul> <li>(1) From your immediate family (spouse, parent, sibling or child);</li> <li>(2) From a federally insured financial institution or made in accordance with existing law in the ordinary course of doing business of making loans. The loan must bear the usual and customary rate of interest, be made on a basis which assures repayment, evidenced by a written instrument and subject to a due date or amortization schedule;</li> <li>(3) Secured by a recorded security interest in collateral, bearing the usual and customary interest rate of the lender made on a basis which assures repayment; evidenced by a written instrument and subject to a</li> </ul>			
	due date or amortization schedule; (4) From a partnership in which you have at least ten percent (10%) partnership interest; (5) From a corporation in which more than fifty percent (50%) of the outstanding voting shares are owned by you or by your immediate family (spouse, parent, sibling or child).			
	NONE			
	Alle			
14.	NO CHANGES IN ITEMS 7-13 (Check if applicable):			
	There has been no change in the conditions listed in Itams 7 - 13 since my previous report to the Tennessee Ethics Commission.			

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## 15. TO BE SIGNED BY REPORTING OFFICIAL (must be attested to by a witness)

I certify that the information contained in this disclosure statement is true and that it is a complete and accurate report as required by the Conflict of Interest Disclosure Act.

Signature of Official

I, the undersigned, do hereby witness the above signature which was signed in my presence.



SS-8004